# Sample State-Level Logic Models to Reduce the Non-Medical Use and Related Consequences of Opioids

The following logic models offer two approaches for developing an action plan to address opioid-related problems or goals. The first model focuses on the consequences of heroin consumption—specifically fatal overdose. The second addresses the consumption of opioids, with a focus on the non-medical use of prescription opioids. Depending on the substance of concern (heroin vs. more general opioids), different risk factors may be relevant.

In addition, we have included sample resources containing information related to strategies and interventions included in the models.

Please note that these logic models should only be used as a guide, as the risk factors included will not be present in, or relevant to, all environments. Also, the interventions included are only examples. Additional interventions and inputs might include policy change, bystander-focused interventions, and other targeted educational interventions.

## Sample 1: State-Level Logic Model to Reduce Opioid Overdose

[Include overall Problem or Goal Statement Here. This should be specific (Who? What? Where?) and supported by needs assessment data.]

Example: Adults (age 35-54) in urban areas in ANYSTATE are at high risk for fatal opioid overdose.

# State-Identified Contributing Factors

# Interventions and Inputs

#### Process Measures/ Outputs

(Measure of activities from "Interventions and Inputs" column)

#### **Short-Term Outcomes**

(Changes as a direct result of the "Interventions and Inputs")

# Intermediate Outcomes

(Changes in the Intermediate Variable/Contributing Factor)

#### Long-Term Outcomes

(Changes in the Problem Statement)

Limited community provider knowledge of and ability to respond to fatal overdose risk factors

Training for community providers on overdose risk factors, recognition and response

Number of new community partners, providers and/or sectors trained

Increase in the number of new community partners, providers, and/or sectors who have received training in overdose risk factors, recognition, and response Community providers/trainees demonstrate improved knowledge of risk factors, recognition and response as demonstrated by...

Fatal opioid
overdose rates for
adults in urban
areas in
ANYSTATE are
reduced by X in X
years, as indicated
by...

<sup>&</sup>lt;sup>1</sup>This can refer to general providers, also healthcare providers, social service providers, first responders and others, including those who come into contact with those at a high-risk of overdose. Your process outcome would be measured according to which providers you are training. Training on the use of Narcan could be incorporated into this strategy (and should then be reflected in the outcomes columns).

# Sample 2: A State-Level Logic Model for Reducing Nonmedical Use of Opioids

[Insert Overall Problem or Goal Statement Here. This should be specific (Who? What? Where?) and supported by needs assessment data.]

Example: Young adults (age 18-25) in urban areas in ANYSTATE are at high risk for the non-medical use of opioids.

State-Identified contributing factors	Interventions and Inputs	Process Measures/ Outputs (Measure of activities from "Interventions and Inputs" column)	Short-Term Outcomes (Changes as a direct result of the "Interventions and Inputs")	Intermediate Outcomes (Changes in the Intermediate Variable/ Contributing factor)	Long-Term Outcomes (Changes in the Problem Statement)
Availability (retail access) to opioids for young adults	Sharing of prescription drug monitoring program data across systems—create datasharing systems among key partners with a new campaign that provides educational materials and seminars on system use.	# of seminars, # and type of educational materials distributed	Increased use of prescription drug monitoring program (PDMP) system, as indicated by an increase in # and type of partners reporting use of PDMP data and in # of times data is shared  Providers report increased knowledge of the risks of sharing medication, clinical guidelines, and safe prescribing practices from pre- to post-test	Availability (retail access) to opioids for young adults has decreased by X amount in X time, as indicated by PDMP data	Non-medical use of opioids for young adults in urban areas in ANYSTATE are reduced by X% in X years, as indicated by
		# of new partners/sectors enrolled in sharing system			
		# of times data is shared			
	Develop provider education about the risks of sharing medication, clinical guidelines, and safe prescribing practices	# of providers trained			
		# of trainings			
Low perception of harm of use	Create and implement a public awareness campaign targeting urban young adults to increase perception of harm	# of venues, views, airings, website hits	Campaign has adequate reach and dose among young adults, as indicated by	X% increase in young adult perception of harm, as indicated by…	

<sup>&</sup>lt;sup>2</sup>Depending on the design of a state's PDMP, this could be broadened to include not just hospital staff, but also law enforcement and others who might have access to PDMP data. This definition then affects the measurement of the outcomes. (i.e., types of partners is related to types of providers who are able to view the PDMP data in your state, as defined by your state's PDMP.)

<sup>&</sup>lt;sup>3</sup>The short-term outcome for the awareness campaign is an assessment of the campaign's reach and dose. While this may sometimes be considered a process measure, this is a hard-to-reach population where change will require adequate message saturation and time for the message to take root. Increases in perception of harm then becomes the intermediate outcome that logically follows demonstration of adequate reach and dose.

### Media Campaigns and Educational Materials: Selected Examples

#### **Substance Abuse Prevention Media Campaigns**

http://captus.samhsa.gov/access-resources/substance-abuse-prevention-media-campaigns

This tool offers examples of media campaigns developed by states, jurisdictions, and national organizations to target substance abuse prevention.

#### **Opioid Overdose Prevention Education**

http://www.stopoverdose.org/

The Stop Overdose website, developed by the University of Washington's Alcohol and Drug Abuse Institute, offers education, training, and answers to frequently asked questions about preventing and reversing overdoses and getting the opiate overdose antidote naloxone (Narcan).

## Training for Community Providers on Overdose Risk Factors, Recognition and Response

Substance Abuse and Mental Health Services Administration's (SAMHSA): Opioid Overdose Prevention Toolkit

http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit/SMA13-4742

This toolkit can be used to equip communities and local governments with material to develop policies and practices to help prevent opioid-related overdoses and deaths. The toolkit also addresses issues for first responders, treatment providers, and those recovering from opioid overdose.

#### Harm Reduction Coalition: Overdose Prevention Resources

http://harmreduction.org/our-work/overdose-prevention/

The Harm Reduction Coalition provides training and technical assistance on implementation of overdose prevention programs with naloxone distribution. Online resources include information on overdose prevention and risk factors, and on responding to an overdose using naloxone; a comprehensive manual on how to implement an overdose prevention program; and educational materials that can be adapted for program use.

#### **Prescribing Practices and Guidelines**

Responsible Opioid Prescribing: A Clinician's Guide

http://www.fsmb.org/book/

The Federation of State Medical Boards Foundation undertakes educational and scientific research projects designed to expand public and medical professional knowledge and awareness of challenges affecting health care and health care regulation.

### Sharing Prescription Drug Monitoring Program (PDMP) Data across Systems

**PDMP Center for Excellence:** 

http://www.pdmpexcellence.org/

The Center collaborates with a wide variety of PDMP stakeholders, including federal and state governments and agencies, universities, health departments, and medical and pharmacy boards. It is advised by an expert panel of nationally recognized professionals in addiction treatment, pain medicine, public health, and epidemiology.

#### **Additional Resource**

**Prescription Drug Overdose: State Laws** 

http://www.cdc.gov/HomeandRecreationalSafety/Poisoning/laws/index.html